

Application Data Sheet

Application Information

Application number::	Unassigned
Filing Date::	01/25/2002
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	INTERACTIVE EDUCATION SYSTEM
Attorney Docket Number::	04870.00009
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	YES
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	NO
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alfred
Middle Name:: A.
Family Name:: Norcott
Name Suffix::
City of Residence:: Vienna
State or Province of Residence:: VA
Country of Residence:: US
Street of mailing address:: 1520 W. Altorfer Drive
City of mailing address:: Peoria
State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 61655

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Aleksandar
Middle Name:: S.
Family Name:: Manov
Name Suffix::
City of Residence:: Peoria
State or Province of Residence:: IL
Country of Residence:: US
Street of mailing address:: 6116 North Saint Mary's Road
City of mailing address:: Peoria

State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 61614

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: SVI Systems, Inc.
 Street of mailing address:: 1520 W. Altorfer Drive
 City of mailing address:: Peoria
 State or Province of mailing address:: IL
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 61655